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## \*BIBDATASHEET\*

CONFIRMATION NO. 4075

Bib Data Sheet

|                             |                                       |              |                        |                                       |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------------|
| SERIAL NUMBER<br>10/797,615 | FILING DATE<br>03/10/2004<br><br>RULE | CLASS<br>052 | GROUP ART UNIT<br>3635 | ATTORNEY<br>DOCKET NO.<br>E0616-00001 |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------------|

APPLICANTS  
 Michael Jerry Brown, Warner Robins, GA;

\*\* CONTINUING DATA *yes on*  
 This appln claims benefit of 60/453,323 03/10/2003

\*\* FOREIGN APPLICATIONS *None on*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 05/26/2004

|  |   |                           |                         |                       |                            |
|--|---|---------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br><i>Examiner's Signature</i> Initials | STATE OR<br>COUNTRY<br>GA | SHEETS<br>DRAWING<br>14 | TOTAL<br>CLAIMS<br>40 | INDEPENDENT<br>CLAIMS<br>3 |
|--|---|---------------------------|-------------------------|-----------------------|----------------------------|

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TITLE  
 Telescoping pier foundation

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|-----------------------------------|---|--|
| FILING FEE<br><br>RECEIVED<br>630 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
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